PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

963501

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE OR			OTHER THAN SMALL ENTITY	
TOTAL CLAIMS			36					RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMB	ER EXTRA		BASIC FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			<i>M</i> minus 20=		*	16		X\$ 9=		OR	X\$18=	288
INDEPENDENT CLAIMS			3 minus 3 =		*			X40=		OR	X80=	
MULTIPLE DEPENDENT CLAIM PRESENT								+135=		OR	+270=	
* If the difference in column 1 is less than zero, ente					r "0" in c	olumn 2		TOTAL		OR	TOTAL	998
CLAIMS AS AMENDED - PART II							-	SMALL E	NTITY	OR	OTHER SMALL E	THAN
		(Column 1) CLAIMS	A STATE OF THE STA	(Colui		(Column 3)	1 1	OWALL	ADDI-	I I	OMALL	ADDI-
AMENDMENT A		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	OUSLY	PRESENT EXTRA		RATE	TIONAL		RATE	TIONAL FEE
	Total	in the second	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	T CL AINA	=		X40=		OR	X80=	
	FIRST PRESE	NTATION OF MI	JUITPLE DEF	ENDEN	CLAIM		1	+135=		ÖR	+270=	
	ميد دهي . مسمون د ايا د د اياستند	A State of State of the State o		;				TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
				•		بغد						
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI PAID	IBER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	1 2 2	Minus	**		=	brack brack	X\$ 9=		OR	X\$18=	
	Independent		Minus	***		=		X40=		OR	X80=	1 1
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							105			070	
			-			÷	Į	+135=		OR	+270= TOTAL	, •
			,				,	TOTAL ADDIT. FEE		OR	ADDIT. FEE	
		(Column 1)	and the state of t	(Colu	mn 2)	(Column 3)	_					
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	IBER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	* '	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X40=		OR	X80=	
لــا	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						┛ ┃	+135=			+270=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."							Ĺ	TOTAL		OR	TOTAL	
		mber Previously Pa mber Previously P					·" /	ADDIT. FEE		OR	ADDIT. FEE	
	The "Highest Nur	nber Previously Pa	id⊾For" (Total or	Independ			er fou	ınd in the app	ropriate box	in col	umn 1.	